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**About the cover**

This manuscript describes the results of a multicenter, prospective birth cohort study of preterm infants born at 32+0 to 35+0 weeks’ gestation and followed for 3 years. Recurrent wheezing rates during year 1 and 2 were 19% and decreased to 13.3% in year 3. Risk factors for recurrent wheezing during year 2 and 3 included day care attendance, acetaminophen use during pregnancy, and need for mechanical ventilation in the neonatal period. Atopic dermatitis on year 2 and male sex on year 3 were also independently associated with recurrent wheezing. Palivizumab prophylaxis for respiratory syncytial virus during the first year of life decreased the risk of recurrent wheezing on year 3. Pulmonary function test (FEV0.5) were significantly lower in children who developed recurrent wheezing. Lung morbidity is important during the first 3 years of life in moderate-to-late premature infants.